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PTO/SB/21 (04-07)

| ADEMARKE Under the Paperwork Reduction Act of 1 | 995 no person | U.S. | Patent and Tr | rademark (| Office: U | S. DEPARTMENT OF COMMERCE displays a valid OMB control number. | | | | |
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| Unider the resolution to see a second | | Application Number | 1 | 09/835,064 | | | | | | |
| TRANSMITTAL | | Filing Date | 04/13/2001 | | | | | | | |
| FORM | First Named Inventor | G. GIUFFRIDA | | | | | | | | |
| | | Art Unit | 2165 | 2165 | | | | | | |
| (to be used for all correspondence after in | tial filing) | Examiner Name | Abel Jalil, I | Neveen | | | | | | |
| Total Number of Pages in This Submission | 37 | Attorney Docket Number | HRL065 | | | | | | | |
| ENCLOSURES (Check all that apply) | | | | | | | | | | |
| | T | | Gracappiy | | After A | llowance Communication to TC | | | | |
| Fee Transmittal Form | | Drawing(s) | | | Communication to Board | | | | | |
| Fee Attached | | Licensing-related Papers | | | Appeal Communication to Board of Appeals and Interferences | | | | | |
| Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.5 | Rema | Petition Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on Corks | Address | RCE 131 de Apper | Communication to TC I Notice, Brief, Reply Brief) etary Information Letter Enclosure(s) (please Identify : on ipt Postcard | | | | | |
| SIGI | NATURE (| OF APPLICANT, ATT | ORNEY. C | R AGE | ENT | | | | | |
| Firm Name Tope MoKay & Associ | | | <u> </u> | | | | | | | |
| Signature / Signature | | | | | | | | | | |
| | } | | | | - | | | | | |
| Printed name Cary Tope-McKay | | | | | | | | | | |
| Date 05/22/2008 | | | Reg. No. | 41,350 | | | | | | |
| CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on | | | | | | | | | | |
| the date shown below: Signature | · | | | | | | | | | |
| Typed or printed name Cary Tope-M | | <u> </u> | | Date | 05/22/2008 | | | | | |

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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| | | | Application Number 09/835 | | 09/835,00 | 064 | | | | |
| FEE TRANSMITTAL | | | Filing Date 04/13 | | 04/13/200 | /13/2001 | | | | |
| For FY 2008 | | | | First Named Inventor G | | G. GIUFFRIDA | | | | |
| Applicant claims small antity status. See 27 CED 1 27 | | | | Examiner Name A | | Abel Jalil, Neveen | | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | Art Unit 2165 | | | | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 930.00 | | | Attorney Docket No. HRL065 | | | | | | | |
| METHOD OF P | AYMENT (c | heck all t | hat apply) | | | | | | | |
| ☐ Check ✓ | Credit Card | ы □м | oney Order | Non | e Other (| please ide | entify): | | | |
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| FEE CALCULA | TION | | | | | | | | | |
| 1. BASIC FILIN | | | | | 011 FEE2 | | | | | |
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| Application T | <u>ype F</u> | | Fee (\$) | Fee (\$ | | Fee | | (\$) | Fees | Paid (\$) |
| Utility | | 310 | 155 | 510 | 255 | 21 | 0 10 | 5 | | |
| Design | 2 | 210 | 105 | 100 | 50 | 13 | 0 6 | 5 | - | |
| Plant | : | 210 | 105 | 310 | 155 | 16 | 0 8 | 0 | | |
| Reissue | ; | 310 | 155 | 510 | 255 | 62 | 0 31 | 0 | | |
| Provisional | : | 210 | 105 | 0 | 0 | | 0 | 0 | | |
| 2. EXCESS CL | | | | | | | F | ee (\$) | Small En Fee (\$) | _ |
| Fee Description Each claim of | | uding Re | issues) | | | | _ | 50 | 25 | • |
| | | | ncluding Reissu | ies) | | | | 210 | 105 | |
| Multiple dependent claims | | | | | | | | 370 | 185 | 01-: |
| <u>Total Claims</u> <u>Extra Claims</u> <u>Fee (\$)</u> <u>Fee (— — — — — — — — — — — — — — — — — —</u> | | | | <u>Fee</u> | | | | ultiple Dependent Claims Fee (\$) Fee Paid (\$) | | |
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| - 3 or HP = x = HP = highest number of independent claims paid for, if greater than 3. | | | | | | | | | | |
| 3 APPLICATION SIZE FEE | | | | | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | | |
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| 100 = / 50 = (round up to a whole number) x = | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid | | | | | | | Fees Paid (\$) | | | |
| Other (e.g., late filing surcharge): RCE and 1Month Extension Fee \$930 | | | | | | | \$930 | | | |
| outer (v.g., into him government) Trock and International Control | | | | | | | | | | |
| SUBMITTED BY | - (- | | | Т | Registration No. | 41 250 | | Telephon | ie 310-589 | 2-8158 |
| Signature | Constitution | -1/ | \ | | (Attorney/Agent) | 41,350 | | Date 05/2 | | |

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| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | | if Known | | | |
| FEE TRAI | Application Numb | | 09/835,064 | | | | | |
| | Filing Date | ì | 04/13/2001 | | | | | |
| For F | First Named Inve | ntor G. GIUFI | G. GIUFFRIDA | | | | | |
| Applicant claims small entity | status See 3 | 7 CFR 1 27 | Examiner Name | Abel Jalil | , Neveen | | | |
| | | | Art Unit | 2165 | | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) | 930.00 | Attorney Docket I | No. HRL065 | | | | |
| METHOD OF PAYMENT (che | ck all that ap | oply) | | | | | | |
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| Deposit Account Deposit | Account Number | r: | Deposit Acc | ount Name: | | | | |
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| information and authorization on PTC | D-2038. | | | | | | | |
| FEE CALCULATION | | | | | | | | |
| 1. BASIC FILING, SEARCH, | | NATION FEES | | | | ľ | | |
| FIL | ING FEES. Small E | | RCH FEES Small Entity | EXAMINATION Small | N FEES Entity | | | |
| Application Type Fee | (\$) <u>Fee (</u> \$ | | | | e (\$) | ees Paid (\$) | | |
| Utility 31 | 0 155 | 510 | 255 | 210 10 |)5 | | | |
| Design 21 | 0 105 | 100 | 50 | 130 | 55 | | | |
| Plant 21 | 0 105 | 310 | 155 | 160 8 | 30 — | | | |
| Reissue 31 | 0 155 | 510 | 255 | 620 31 | 10 — | | | |
| Provisional 21 | 0 105 | 0 | 0 | 0 | 0 — | | | |
| 2. EXCESS CLAIM FEES | | | | _ | | Entity | | |
| Fee Description | | | | j | |) (\$) 25 | | |
| Each claim over 20 (include | | | | | | 05 | | |
| Each independent claim ov Multiple dependent claims | | ing Reissues) | | | | 85 | | |
| Total Claims Extra | Fee (\$) Fe | e Paid (\$) | M | luitiple Depende | | | | |
| - 20 or HP = | x _ | | | | Fee (\$) F | ee Paid (\$) | | |
| HP = highest number of total claims | | | a Daid (\$) | | | | | |
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| 3. APPLICATION SIZE FEE If the specification and draw | inas avagad | 100 cheets of no | ner (evoluding el | ectronically fil | ed sequence or | computer | | |
| listings under 37 CFR 1 | fings exceed | nnlication size fo | ee due is \$260 (\$ | 130 for small e | ntity) for each | additional 50 | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = (round up to a whole number) x = | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$) | | | | | | | | |
| Other (e.g., late filing surcharge): RCE and 1Month Extension Fee \$930 | | | | | | | | |
| SUBMITTED BY | | | | | | | | |
| Signature | | | Registration No. (Attorney/Agent) | 1,350 | Telephone 310 | -589-8158 | | |
| | av | | (Attorney/Agent) | | Date 05/22/200 | | | |
| Name (Print/Type) Cary Tope-McK | ay / | | | | | | | |

This collection of information is required by 37/CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.